

[Supreme Court's landmark ruling gives hope to uninsured families](#) (Greensboro News and Record – June 29, 2012)

By Nancy H. McLaughlin

Mable Scott watched President Barack Obama discuss the Supreme Court's landmark health care decision on television Thursday, as husband Moses napped on and off nearby. Moses Scott has bone and thyroid cancer. He is uninsured. For the Scotts and other people in the Triad, Thursday's ruling means that the health care reform Congress passed two years ago continues to move forward. It also means just about everyone will have more choices. Under the Affordable Care Act ruling — which goes into effect in stages starting in 2014 — Mable Scott's husband of 37 years won't be turned down for coverage. "I grasp enough of what it means to know anything is better than what we have now," said Mable Scott, 67, a former nurse's aide, from their room at an extended-stay hotel, provided through charity. The law provides health coverage for millions of uninsured Americans, in part by preventing insurance companies from denying coverage to people who are sick or have pre-existing conditions. It also offers an array of affordable private health insurance plans to choose from. A provision expands Medicaid to include more low-income families, although it is unclear how many. Young adults are able to remain on their parents' policy until they turn 26. "This is huge," said Eric Ford, a UNCG professor in the School of Nursing and Bryan School of Business and Economics. Ford was among a group of health economists who signed a brief with the court calling the mandate that everyone must carry health insurance unconstitutional. But he sees the significance of the ruling. "You've got to go back to the civil rights era to see these rulings that will impact everybody in our society and the institutions that service them, including our employers, our health care systems and our local government," Ford said. John Nosek, the director of a local medical office, worries about the financial impact on businesses. "I think liberty and freedom passed away today," Nosek said. This may stretch out the recession, said Nosek, who has worked in the health care industry for 39 years. "I think it's going to continue our economic downturn in that employers will be making decisions on their budgets based on this obligation to the law," he said. Ask Moses Scott, who uses a feeding tube, what it means to be among the number without health insurance and his face tightens. His is an example of a family who worked and had insurance at one time, but lost everything because of catastrophic illness. "Nobody has said, 'You need to come back in six months, in eight months,'" Scott, 69, said of a past doctor's visit. "Why? Because they aren't getting paid." He also is awaiting a decision on whether he qualifies for Medicaid — a pool that will expand under Obama's law. Jessica Thomas of Kernersville, who has multiple sclerosis, buys health insurance through a high-risk pool, but she knows others with health problems who have no insurance at all. "It makes me sad that it was even up for debate," Thomas said. "In the long term, I think we are going to see more people taking better care of themselves." Thomas works two part-time jobs — as a chronic illness counselor and as a clinical social worker at her husband's small mental health business. She was diagnosed with the potentially progressive disease seven years ago. Her husband couldn't add her to his policy because it was a pre-existing condition. She pays

less than \$200 a month for health coverage that has a \$5,000 deductible. The high-risk pool is more expensive, but it gives her access to the preventive care she credits with helping manage the disease. Thomas, who has a 4-year-old son, finishes graduate school in the fall. "I attribute that to good disease management, a healthy lifestyle and receiving MS therapies and medications," Thomas said. "I (also) work with a lot of people who are very vulnerable to not having insurance." People like Maria Addison. Her mother died of colon cancer. Despite being at high risk for the disease, Addison, 48, has yet to have an annual colonoscopy. Yearly tests are recommended starting at age 40 for people with a family history, but she hasn't had health insurance in more than a decade. "There are so many people out there who know of things in their family history that need to be checked, that need to be cared for, but they don't bother to follow up because they cannot afford to go to the doctor," she said. With Thursday's ruling, Addison expects that to change. "I think it will give us a lot of mental peace, and I think we will be able to take better care of ourselves," she said. Addison, whose family income is \$7 too much for her to receive Medicaid, expects to qualify. She recently has qualified for a colonoscopy through a program at Triad Adult and Pediatric Medicine, which traditionally serves a low-income population. "You know what a lot of people do — and it sounds crazy— but we wait until we get to the worst point to go to the hospital," she said. "We can't afford to pay them, but they don't turn us away."